UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

JUSTIN FARROW,

Plaintiff,

-against-

OFFICER CLARKE, et al.,

Defendants.

No. 22-CV-5952 (KMK)

ORDER OF SERVICE

KENNETH M. KARAS, United States District Judge:

Plaintiff, who currently is incarcerated at Eastern Correctional Facility and is proceeding pro se, brings this action under 42 U.S.C. § 1983, and the Religious Land Use and Institutionalized Persons Act ("RLUIPA"), 42 U.S.C. §§ 2000cc–2000cc-5. (*See generally* Am. Compl. (Dkt. No. 38).) Plaintiff asserts claims for, among other things, excessive force and deliberate indifference, in violation of his constitutional rights, arising from incidents that he alleges occurred at Sing Sing Correctional Facility ("Sing Sing"). (*See id.* at 5–11.) By order dated August 10, 2022, the Court granted Plaintiff's request to proceed in forma pauperis ("IFP"), that is, without prepayment of fees. <sup>1</sup> (*See* Order (Dkt. No. 7).) On May 15, 2024, the operative Amended Complaint was docketed. (*See* Am. Compl.)

<sup>&</sup>lt;sup>1</sup> Prisoners are not exempt from paying the full filing fee even when they have been granted permission to proceed IFP. *See* 28 U.S.C. § 1915(b)(1).

### I. Discussion

### A. Service on Named Defendant

Because Plaintiff has been granted permission to proceed IFP, he is entitled to assistance from the Court and the U.S. Marshals Service in effecting service.<sup>2</sup> *Walker v. Schult*, 717 F.3d. 119, 123 n.6 (2d Cir. 2013); *see also* 28 U.S.C. § 1915(d) ("The officers of the court shall issue and serve all process . . . in [IFP] cases."); Fed. R. Civ. P. 4(c)(3) (explaining that courts must order the Marshals Service to serve if the plaintiff is authorized to proceed IFP).

To allow Plaintiff to effect service on Correction Officers Clarke, Leslie, Murray, Schepis, R. Batolotti, and Sergeant Fan through the U.S. Marshals Service, the Clerk of Court is respectfully instructed to fill out a U.S. Marshals Service Process Receipt and Return form ("USM-285 form") for each Defendant. The Clerk of Court is further instructed to issue summonses and deliver to the Marshals Service all the paperwork necessary for the Marshals Service to effect service upon Defendants.

If the Amended Complaint is not served within ninety days after the date summonses are issued, Plaintiff should request an extension of time for service. *See Meilleur v. Strong*, 682 F.3d 56, 63 (2d Cir. 2012) (holding that it is the plaintiff's responsibility to request an extension of time for service).

Plaintiff must notify the Court in writing if his address changes, and the Court may dismiss the action if Plaintiff fails to do so.

<sup>&</sup>lt;sup>2</sup>Although Rule 4(m) of the Federal Rules of Civil Procedure generally requires that a summons be served within ninety days of the date a complaint is filed, Plaintiff is proceeding IFP and could not have effected service until the Court reviewed the Amended Complaint and ordered that any summonses be issued. The Court therefore extends the time to serve until ninety days after the date any summonses issue.

### B. Identification of Doe Defendants

Under *Valentin v. Dinkins*, a pro se litigant is entitled to assistance from the district court in identifying a defendant. 121 F.3d 72, 76 (2d Cir. 1997). In the Amended Complaint, Plaintiff supplies sufficient information to permit the New York State Department of Corrections and Community Service ("DOCCS") to identify the following defendants: (1) John Does 1–2, who were allegedly involved in a use-of-force incident at 11:45 a.m. on April 19, 2021, at Sing Sing's A-block mess hall bridge; (2) Area Sergeant John Doe 3, who photographed Plaintiff's injuries on April 19, 2021, and escorted him from the medical clinic to the segregated housing unit ("SHU"); (3) John Doe 4, a nurse who was present in the medical clinic at about noon on April 19, 2021, and who had Plaintiff sign the waiver of medical treatment; and (4) John Doe 5, who served Plaintiff his meals while he was in the SHU, beginning on April 23, 2021, during Ramadan.

It is therefore ordered that the New York State Attorney General, who is the attorney for and agent of DOCCS, must ascertain the identity and badge number of each John Doe whom Plaintiff seeks to sue here and the address where that Defendant may be served. The New York State Attorney General must provide this information to Plaintiff and the Court within sixty days of the date of this Order.

Within thirty days of receiving this information, Plaintiff must file a second amended complaint naming the John Doe Defendant(s). That amended complaint will replace, not supplement, the original Complaint and the Amended Complaint. An amended complaint form that Plaintiff should complete is attached to this Order. Once Plaintiff has filed an amended complaint, the Court will screen the amended complaint and, if necessary, issue an order directing the Clerk of Court to complete the USM-285 forms with the addresses for the named

John Doe Defendants and deliver to the U.S. Marshals Service all documents necessary to effect service.

### C. Automatic Discovery

Local Civil Rule 33.2, which requires defendants in certain types of prisoner cases to respond to specific, court-ordered discovery requests, applies to this Action. Those discovery requests are available on the Court's website under "Forms" and are titled "Plaintiff's Local Civil Rule 33.2 Interrogatories and Requests for Production of Documents." Within 120 days of service of the Amended Complaint, Defendants must serve responses to these standard discovery requests. In their responses, Defendants must quote each request verbatim.<sup>3</sup>

### II. Conclusion

The Clerk of Court is respectfully directed to mail: (1) a copy of this Order and an information package to Plaintiff; and (2) a copy of this Order and the Amended Complaint to the New York State Attorney General at: 28 Liberty Street, 16th Floor, New York, NY 10005.

The Clerk of Court is further asked to issue summonses for Correction Officers Clarke, Leslie, Murray, Schepis, R. Batolotti, and Sergeant Fan, complete the USM-285 form with the addresses for Defendants, and deliver to the U.S. Marshals Service all documents necessary to effect service.

The Parties are advised that Local Civil Rule 33.2 applies to this Action.

A "Second Amended Complaint" form is attached to this Order.

<sup>&</sup>lt;sup>3</sup> If Plaintiff would like copies of these discovery requests before receiving the responses and does not have access to the website, Plaintiff may request them from the Pro Se Intake Unit.

SO ORDERED.

Dated: June 12, 2024

White Plains, New York

KENNETH M. KARAS

United States District Judge

#### SERVICE ADDRESS FOR EACH DEFENDANT

- Correction Officer Clarke
   Sing Sing Correctional Facility
   354 Hunter Street
   Ossining, NY 10562-5442
- Correction Officer Leslie Sing Sing Correctional Facility 354 Hunter Street Ossining, NY 10562-5442
- 3. Correction Officer Murray
  Sing Sing Correctional Facility
  354 Hunter Street
  Ossining, NY 10562-5442
- 4. Correction Officer Schepis Sing Sing Correctional Facility 354 Hunter Street Ossining, NY 10562-5442
- Correction Officer R. Batolotti Sing Sing Correctional Facility 354 Hunter Street Ossining, NY 10562-5442
- 6. Sergeant Fan
  Great Meadow Correctional Facility
  P.O. Box 51
  Comstock, NY 12821-0051

# UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

| Write the full name of each plaintiff.  | CV<br>(Include case number if one has been assigned) |
|---|--|
| -against-   | COMPLAINT<br>(Prisoner)                              |
|   | Do you want a jury trial? ☐ Yes ☐ No                 |
| Write the full name of each defendant. If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section IV. |  |

### **NOTICE**

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

State below the federal legal basis for your claim, if known. This form is designed primarily for

# I. LEGAL BASIS FOR CLAIM

| prisoners challenging the constitutionality of their conditions of confinement; those claims are often brought under 42 U.S.C. § 1983 (against state, county, or municipal defendants) or in a "Bivens" action (against federal defendants). |   |                     |                                    |  |
|--|---|---------------------|------------------------------------|--|
| ☐ Violation of my  | federal constitutional                                  | rights              |                                    |  |
| ☐ Other:   |   |                     |                                    |  |
| II. PLAINTIF   | F INFORMATION   |                     |                                    |  |
| Each plaintiff must provide the following information. Attach additional pages if necessary.   |   |                     |                                    |  |
| First Name   | Middle Initial  | Last Naı            | me                                 |  |
| •  | nes (or different forms o<br>eviously filing a lawsuit. | f your name) you l  | have ever used, including any name |  |
| Prisoner ID # (if you have previously been in another agency's custody, please specify each agency and the ID number (such as your DIN or NYSID) under which you were held)  |   |                     |                                    |  |
| Current Place of De  | tention   |                     |                                    |  |
| Institutional Addres   | S   |                     |                                    |  |
| County, City   |   | State               | Zip Code                           |  |
| III. PRISONE   | R STATUS  |                     |                                    |  |
| Indicate below whe   | ther you are a prisoner o                               | or other confined p | person:                            |  |
| ☐ Pretrial detaine   | e   |                     |                                    |  |
| ☐ Civilly committed detainee   |   |                     |                                    |  |
| ☐ Immigration detainee   |   |                     |                                    |  |
| <ul><li>□ Convicted and sentenced prisoner</li><li>□ Other:</li></ul>  |   |                     |                                    |  |

## IV. DEFENDANT INFORMATION

To the best of your ability, provide the following information for each defendant. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are identical to those listed in the caption. Attach additional pages as necessary.

| Defendant 1: |  |                                  |          |  |  |  |
|--------------|--|----------------------------------|----------|--|--|--|
| First Name   |  | Last Name                        | Shield # |  |  |  |
|              | Current Job Title (or other identifying information) |                                  |          |  |  |  |
|              | Current Work Addr                                    | ess                              |          |  |  |  |
|              | County, City   | State                            | Zip Code |  |  |  |
| Defendant 2: | First Name   | Last Name                        | Shield # |  |  |  |
|              | Current Job Title (o                                 | r other identifying information) |          |  |  |  |
|              | Current Work Addr                                    | ess                              |          |  |  |  |
|              | County, City   | State                            | Zip Code |  |  |  |
| Defendant 3: |  |                                  |          |  |  |  |
|              | First Name   | Last Name                        | Shield # |  |  |  |
|              | Current Job Title (or other identifying information) |                                  |          |  |  |  |
|              | Current Work Address                                 |                                  |          |  |  |  |
|              | County, City   | State                            | Zip Code |  |  |  |
| Defendant 4: | First Name   | Last Name                        | Shield # |  |  |  |
|              | Current Job Title (or other identifying information) |                                  |          |  |  |  |
|              | Current Work Address                                 |                                  |          |  |  |  |
|              | County, City   | State                            | Zip Code |  |  |  |

| V.     | STATEMENT OF CLAIM   |
|--------|--|
| Place( | s) of occurrence:  |
|        |  |
| Date(s | of occurrence:   |
| FACT   | 6:   |
| harme  | ere briefly the FACTS that support your case. Describe what happened, how you were d, and how each defendant was personally involved in the alleged wrongful actions. Attach nal pages as necessary. |
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| INJURIES:   |
|---|
| If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received. |
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| VI. RELIEF  |
| State briefly what money damages or other relief you want the court to order.   |
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### VII. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I understand that if I file three or more cases while I am a prisoner that are dismissed as frivolous, malicious, or for failure to state a claim, I may be denied *in forma pauperis* status in future cases.

I also understand that prisoners must exhaust administrative procedures before filing an action in federal court about prison conditions, 42 U.S.C. § 1997e(a), and that my case may be dismissed if I have not exhausted administrative remedies as required.

I agree to provide the Clerk's Office with any changes to my address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

| Dated   |                | Plaintiff's Signatur | e        |  |
|---|----------------|----------------------|----------|--|
| First Name  | Middle Initial | Last Name            |          |  |
| Prison Address  |                |                      |          |  |
| County, City  | Sta            | te                   | Zip Code |  |
| Date on which I am delivering this complaint to prison authorities for mailing: |                |                      |          |  |